

SECRET

Approved For Release 2001/03/22 : CIA-RDP78-03092A000100040010-3

NOMINATION AND DESIGNATION OF PARTICIPANT CIA RETIREMENT AND DISABILITY SYSTEM

SECTION A**STATUS OF EMPLOYEE**

1. SERIAL NUMBER	2. NAME (Last-First-Middle)	3. DATE OF BIRTH	4. SD	5. EMPLOYMENT CATEGORY (Refer to R 20-2)
6. CURRENT OCCUPATIONAL TITLE		7. GRADE	8. OFFICE OF ASSIGNMENT	
9. ASSIGNMENT LOCATION → <input type="checkbox"/> DEPARTMENTAL <input type="checkbox"/> U.S. FIELD <input type="checkbox"/> FGN. FIELD		10. LONGEVITY COMPUTATION DATE		11. SERVICE COMPUTATION DATE

SECTION B**PERFORMANCE OF QUALIFYING SERVICE**

1. Has this employee completed any qualifying service? <input type="checkbox"/> YES <input type="checkbox"/> NO. If "Yes", list periods of such service below							
INCLUSIVE DATES (From- To-)		OCCUPATIONAL TITLE	LOCATION WHERE SERVICE PERFORMED (City-Country or State)	CHECK ONE		TOTAL TIME	
MONTH/DAY/YR	MONTH/DAY/YR			PCS	TDY	MONTH	DAYS
2. Is this employee currently performing qualifying service? <input type="checkbox"/> YES <input type="checkbox"/> NO. If "Yes", complete the following:							
BEGIN DATE	END DATE	OCCUPATIONAL TITLE	LOCATION	PCS	TDY	MONTHS	DAYS
3. If employee was assigned in the United States during any period of qualifying service listed above, describe his duties below, pointing out those conditions which meet the requirements of QUALIFYING SERVICE.							
4. Is this employee currently on official orders for a PCS assignment requiring the performance of qualifying service? <input type="checkbox"/> YES <input type="checkbox"/> NO. If "Yes", attach a conformed copy of the orders.							
5. CERTIFICATION - The information furnished above has been verified against official Agency records. Where no official record was available, a supporting statement is attached.							
6. TYPED NAME AND TITLE			7. SIGNATURE			8. DATE	

Continued on Reverse Side

FORM 3100 3-65

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GROUP 1
Excluded from automatic
downgrading and
declassification

(4)

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(When Filled In)

SECTION C Approved For Release 2001/03/22 : CIA-RDP78-03092A000100040010-3

1. Based on his career assignment and past and prospective performance of qualifying service, this employee is recommended for designation as a participant in the CIA RETIREMENT AND DISABILITY SYSTEM. He is serving in a career field which normally requires the performance of qualifying service as an integral part of a career in that field. He will be expected to perform qualifying service during the next five years unless otherwise noted below.

Delete last sentence

2. TYPED NAME AND TITLE

3. SIGNATURE

4. DATE

SECTION D

RECOMMENDATION OF CIA RETIREMENT BOARD

1. The record of this employee has been reviewed and the CIA RETIREMENT BOARD has recommended on _____ (DATE) that this employee:

- ☐ be designated as a participant in the CIA RETIREMENT AND DISABILITY SYSTEM
☐ NOT be designated as a participant

2. TYPED NAME AND TITLE

3. SIGNATURE

4. DATE

SECTION E

DETERMINATION BY DIRECTOR OF PERSONNEL

1. It is determined that this employee ☐ meets ☐ does not meet the requirements of Regulation [REDACTED] for designation as a participant in the CIA RETIREMENT AND DISABILITY SYSTEM.

2. SIGNATURE OF DIRECTOR OF PERSONNEL

3. DATE

25X1A

In accordance with Regulation [REDACTED] this employee is ☐ DESIGNATED ☐ NOT designated a participant in the CIA Retirement and Disability System.

25X1A

Substitute new statement

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DIRECTIONS FOR COMPLETING FORM 3100,
NOMINATION AND DESIGNATION OF PARTICIPANT,
CIA RETIREMENT AND DISABILITY SYSTEM

SECTION A - STATUS OF EMPLOYEE

The items of this section are self-explanatory and should be completed by referring to the machine record information provided by the Office of Personnel.

SECTION B - PERFORMANCE OF QUALIFYING SERVICE

Item 1. List periods of qualifying service in chronological order.

Item 2. Under the "End Date" column list the ETD as furnished on FRQ's, cable or dispatch traffic, etc., or show an estimated date based upon a normal tour of duty for the area.

As in Item 1, dates should be by Month/Day/Year and the "Location" column should reflect City - Country or State.

Item 3. Qualifying service in this instance means performance of duty as an Agency employee on a continuing basis which would place the individual at a distinct disadvantage in obtaining other employment either because (1) the skills and knowledge are unique to the clandestine activities of the Agency and are not in demand elsewhere, or (2) the duties are so highly classified that his experience cannot be described in sufficient detail to demonstrate his qualifications adequately to a prospective employer.

Item 4. By conformed copy is meant a legible copy of the original travel order which can be either a carbon or machine reproduced copy.

Item 5. In some instances this certification will cover periods of service performed in other Career Services. However, this certification pertains only

to the fact that the information furnished has been transposed correctly from official Agency records or supporting statements, regardless of the source.

Item 6. This item should contain the name and title of the Career Service Approving Officer or his designee.

Items 7 and 8. Self-explanatory.

SECTION C - RECOMMENDATION OF HEAD OF CAREER SERVICE

Item 1. In addition to the criteria set forth in this item it should be noted that an employee who has completed 15 years of service with the Agency must have performed 60 months of qualifying service, or have sufficient time prior to completion of 15 years service with the Agency within which he could complete a minimum of 60 months of qualifying service.

Items 2, 3 and 4. Self-explanatory.

SECTION D - RECOMMENDATION OF CIA RETIREMENT BOARD

For completion by the Secretary to the CIA Retirement Board.

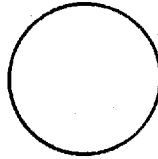
SECTION E - DETERMINATION BY DIRECTOR OF PERSONNEL

For completion by the Director of Personnel.

GENERAL - If additional space is required for completion of any Item on Form No. 3100, please continue in the blank space on the reverse side of the form and, if necessary, on a separate page the same size as this page and reference each continued item by the section and item number to which it relates.

Type or print carefully. An original and one copy should be forwarded to the Office of the Director of Personnel when completed.

SECRET



SERVICE
AGREEMENT

PARAGRAPH E OF [REDACTED] STATES THAT IN ORDER TO
QUALIFY FOR DESIGNATION AS A PARTICIPANT IN THE CIA
RETIREMENT AND DISABILITY SYSTEM, AN EMPLOYEE MUST
HAVE SIGNED A WRITTEN OBLIGATION TO SERVE ANYWHERE
AND AT ANYTIME ACCORDING TO THE NEEDS OF THE AGENCY,
IN ADDITION TO MEETING OTHER SPECIFIED CRITERIA.

STATINTL

I HEREBY DECLARE MY INTENT TO COMPLY WITH THIS
REQUIREMENT AS A CONDITION TO MY BEING CONSIDERED FOR
DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND
DISABILITY SYSTEM.

IN MAKING THIS DECLARATION, IT IS UNDERSTOOD THAT
THE AGENCY WILL GIVE PROPER CONSIDERATION TO MY PARTICULAR
CAPABILITIES, INTERESTS, AND PERSONAL CIRCUMSTANCES.

Signature

Date